DEPARTMENT OF SOCIAL SERVICESCommunity Care Licensing Division

360 South Hope Avenue, C-105 Santa Barbara, CA 93105 (805) 682-7647



PRE-REGISTRATION FORM FOR 2006 CHILD CARE CENTERS

Central Coast Regional Office

(Covers: San Luis Obispo, Santa Barbara, and Ventura Counties)

The following are the dates and locations for COMPONENTS I, II, & III ORIENTATIONS. Please [X] the orientation you wish to attend:

	COMPONENT I & II OI	RIENTATION
 □ Feb. 2, 2006 □ April 6, 2006 □ June 1, 2006 □ August 3, 2006 □ October 5, 2006 □ December 7, 2006 	9:00am – 1:00pm	Community Care Licensing 360 South Hope Ave. C-105 Santa Barbara, Ca 93105
Deadline to submit payment and orientation date.	pre-registration to qualify for	r this orientation is two (2) weeks prior to
	COMPONENT III OR	ENTATION
 □ Feb. 16, 2006 □ April 20, 2006 □ June 15, 2006 □ August 17, 2006 □ October 19, 2006 	9:00am – 12:00pm	Community Care Licensing 360 South Hope Ave. C-105 Santa Barbara, CA 93105
☐ December 14, 2006		
No charge for Compo		r this orientation is: two (2) weeks prior to
No charge for Compo Deadline to submit payment and	pre-registration to qualify fo	r this orientation is: two (2) weeks prior to
No charge for Compo Deadline to submit payment and orientation date. Please print: Name(s) of persons	pre-registration to qualify for	r this orientation is: two (2) weeks prior to
No charge for Compo Deadline to submit payment and orientation date. Please print: Name(s) of persons LAST NAME:	pre-registration to qualify for attending orientation.	
No charge for Compo Deadline to submit payment and orientation date. Please print: Name(s) of persons LAST NAME: LAST NAME:	pre-registration to qualify for attending orientation. FIRS	ST NAME:

PRE-REGISTRATION FORM FOR 2006 FAMILY CHILD CARE HOMES

Central Coast Regional Office

(Covers: San Luis Obispo, Santa Barbara, and Ventura Counties)

Please keep a copy of this form to remind you of the date and location of the orientation you signed up for. The deadline to submit payment and pre-registration is 2 weeks prior to the orientation. Please [X] the orientation you wish to attend: ☐ January 10 ☐ July 11 10:00 a.m. – 12:00 p.m. ☐ January 10 ☐ March 14 ☐ September 12 Community Care Licensing ☐ May 9 □ November 14 360 South Hope Ave. C-105 Santa Barbara, Ca. 93105 ☐ February 8 ☐ August 9 2:00 p.m. - 4:00 p.m. □ April 12 ☐ October 11 Child Development Resources ☐ June 14 ☐ December 13 221 Ventura Blvd. Oxnard, CA 93030 ☐ January 10 □ July 11 6:30 p.m. – 8:30 p.m. ☐ March 14 ☐ September 12 Child Development Resources ☐ May 9 ☐ November 14 221 Ventura Blvd Oxnard, CA. 93030 ☐ January 19 ☐ July 20 1:30 p.m. - 4:00 p.m. Edwards Community Center ☐ March 16 ☐ September 21 ☐ May 18 ☐ November 16 809 B, Freemont Street Santa Maria, CA. 93454 ☐ February 8 ☐ August 9 9:30 a.m. - 12:30 p.m. ☐ April 12 ☐ October 11 **EOC Child Care/Resources Connection** ☐ June 14 ☐ December 13 805 A Fiero Lane San Luis Obispo, CA. 93401 Please print: Names of persons attending orientation, address, phone number, date of the orientation and location you wish to attend. Please submit pre-registration and payment of \$25.00 two weeks prior to the orientation date to: **Community Care Licensing** 360 South Hope Avenue, Suite C-105 Santa Barbara, CA 93105 Orientation Date: _____ Time & Location: ____ LAST NAME: _____ FIRST NAME: _____ LAST NAME: _____ FIRST NAME: _____ ADDRESS: _____ Zip Code: _____ DAYTIME PHONE: (____)_ ALTERNATE PHONE: (____)_ Please send this form and your Registration Fee of \$25 (per person) to the address above. All payments must be

made with a personal check, cashier's check, or money order only. We do not accept cash or credit cards.